

Statement of Deficiencies

713.A: Office of Public Health, State Fire, City Fire, Office of Early Childhood approval

Not Met

713.A: Current approvals by the Office of Public Health, Office of State Fire Marshal, City Fire (if applicable), Office of Early Childhood and the Licensing Division shall be required before the expiration of an existing license.

Finding:

713.A Based on record review/interview(s): The Provider lacked documentation of a current annual inspection and approval from Office of Public Health State Fire Marshal. Provider stated that the facility is in the process of attaining approval from the Office of Public Health and the State Fire Marshall.

1703.B: Visitors - CBC/Accompanied

Not Met

1703.B: An early learning center shall obtain documentation of a satisfactory fingerprint based CBC for each visitor or independent contractor of any kind, prior to the person being present at the center or performing services for the center UNLESS the visitor or independent contractor WILL BE accompanied at all times while on the center premises by an adult, paid, staff member who is not being counted in child to staff ratios, and the center shall have copies of said documentation on-site at all times and available for inspection upon request by the Licensing Division.

1. Documentation of the paid, adult staff member not otherwise counted in child to staff ratios who accompanied a visitor or independent contractor at all times while the visitor or contractor was on the center premises shall include the date, arrival and departure time of the visitor or contractor, language stating that the visit or contractor was accompanied by the staff member at all times while on the premises, and the signature of both the contractor and the accompanying staff member.

Finding:

1703.B Based on record review: A satisfactory fingerprint based CBC was not obtained for each visitor, prior to the person being present at the center or performing services as evidence by: O1, O2, and O3. The Center did not have documentation of the paid, adult staff member not otherwise counted in child to staff ratios who accompanied visitor at all times while they were on the center premises. Documentation did not include the departure time, language stating that they were accompanied by the staff member at all times while on the premises, signature of the contractor and signature of the staff member.

1711-A-B-D-G: Child to Staff Ratio

Not Met

1711-A-B-D-G:

A. Child to staff ratios are established to ensure the safety of all children.

B. Minimum child to staff ratios shall be met at all times.

1. There shall be a minimum of two staff members present at an early learning center when more than one child is present.
2. Only those staff members directly providing care, supervision or guidance to children shall be counted in the child to staff ratios.
- D. Minimum Child to Staff Ratios for Type II and Type III centers:

Ages of Children		Ratio
Infants under 1 year		5:1
1 year	7:1	
2 years		11:1
3 years	13:1	
4 years	15:1	
5 years	19:1	
6 years and up	23:1	

G. Mixed Age Groups - Minimum Child to Staff Ratios

1. An average of the child to staff ratios may be applied to mixed age groups of children ages 2, 3, 4 and 5
2. Child to staff ratios for children under age two are excluded from averaging.
3. When a mixed age group includes children younger than age two, the age of the youngest child determines the child to staff ratio for the group.
4. An average may be applied to a mixed age group consisting only of children ages 5 and older.

Finding:

1711-A-B-D-G Based on observations/interview(s): The Provider failed to meet the required child to staff ratio for children of the following ages: 13 children age 1 with 1 staff. The required ratio for children of this age is 7 children per 1 staff person. At time of arrival, Specialist observed 1 staff on the play yard with 13 one year olds. Provider stated that the other staff stepped into the facility momentarily. Specialist observed that the second staff entered the facility again for about two minutes leaving one staff on the play yard with 13 one year olds. Provider corrected prior to Specialist departure.

Statement of Deficiencies

1715-A.5: State Central Registry

Not Met

1715-A.5: Personnel files for each staff member shall be maintained at the center and shall include the following: documentation of a current, completed state central registry disclosure form indicating no justified (valid) finding of abuse or neglect by the DCFS, or a current determination from the DCFS indicating that the individual does not pose a risk to children.

Finding:

1715-A.5 Based on record review/observations:

Provider failed to have documentation of a completed state central registry disclosure form (SCR 1) prior to an individual being present in or providing services to the center on site and available for review at the center(1705.A-B). 12 of 13 staff, S1, S2, S3, S4, S5, S6, S7, S8, S9, S10, S11, and S12 failed to have documentation of the completed form. Staff were on the premises on October 18, 2016 failed to have documentation of the completed form. Staff were on the premises as observed by the licensing specialist. Provider corrected during licensing inspection.; Provider failed to have documentation of a completed state central registry disclosure form (SCR 1) prior to an individual being present in or providing services to the center on site and available for review at the center(1705.A). 1 of 13 staff, S13 failed to have documentation of the completed form. Staff were on the premises on October 16, 2016 as verified by staff attendance logs.